U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Small PHA Plan Update Annual Plan for Fiscal Year: 2001

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Housing Authority of Dayton					
PHA Number: KY129					
PHA Fiscal Year Beginning: (mm/yyyy) 10-01-01					
PHA Plan Contact Information: Name: Roxanne Craig Phone: (859) 491-7749 TDD: 1-800-247-2510 Email (if available):					
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices					
Display Locations For PHA Plans and Supporting Documents					
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)					
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)					
PHA Programs Administered:					
□ Public Housing and Section 8 □ Section 8 Only □ Public Housing Only					

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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Other (List below, providing each attachment name)	

ii. Executive Summary

[24 CFR Part 903.7 9	(r)	7 9	.)
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At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The only policy and/or program changes for the upcoming year are the HUD mandated requirements of the implementation of a Pet Policy, the Community Service and Self-Sufficiency Policy, and the affects these have on the Admissions and Continued Occupancy Policy and the Dwelling Lease.

Dwelling Lease.
2. Capital Improvement Needs [24 CFR Part 903.7 9 (g)]
Exemptions: Section 8 only PHAs are not required to complete this component.
A. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$99,685
C. X Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
D. Capital Fund Program Grant Submissions
(1) Capital Fund Program 5-Year Action Plan
The Capital Fund Program 5-Year Action Plan is provided as Attachment C.
(2) Capital Fund Program Annual Statement The Capital Fund Program Annual Statement is provided as Attachment B.
3. Demolition and Disposition [24 CFR Part 903.7 9 (h)]
Applicability: Section 8 only PHAs are not required to complete this section.
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)
2. Activity Description

Demolition/Disposition Activity Description		
(Not including Activities Associated with HOPE VI or Conversion Activities)		
1a. Development name:		
1b. Development (project) number:		
2. Activity type: Demolition \[\]		
Disposition		
3. Application status (select one)		
Approved		
Submitted, pending approval		
Planned application		
4. Date application approved, submitted or 1 (1) A ission: (DD/MM/YY)		
5. Number of units affecter		
6. Coverage of action (sele)		
Part of Adevelo		
Total de Topmen		
rd relect all that apply)		
8 for units		
Preference for admission to other public housing or section 8		
Other housing for units (describe below)		
8. Timeline for activity:		
a. Actual or projected start date of activity:		
b. Actual or projected start date of relocation activities:		
c. Projected end date of activity:		
of 110 jeone and and of activity.		
4. Voucher Homeownership Program		
[24 CFR Part 903.7 9 (k)]		
A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program		
pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24		
CFR part 982 ? (If "No", skip to next component; if "yes", describe each		
program using the table below (copy and complete questions for each		
program identified.)		
B. Capacity of the PHA to Administer a Section 8 Homeownership Program		
The PHA has demonstrated its capacity to administer the program by (select all that apply):		
Establishing a minimum homeowner downpayment requirement of at least 3 percent		
and requiring that at least 1 percent of the downpayment comes from the family's		
resources		

Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):
5. Safety and Crime Prevention: PHDEP Plan 24 CFR Part 903.7 (m)]
Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the apcoming year? \$
C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
D. Yes No: The PHDEP Plan is attached at Attachment
6. Other Information 24 CFR Part 903.7 9 (r)]
A. Resident Advisory Board (RAB) Recommendations and PHA Response
1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment G.
3. In what manner did the PHA address those comments? (select all that apply) The PHA changed portions of the PHA Plan in response to comments A list of these changes is included Yes No: below or
Yes No: at the end of the RAB Comments in Attachment Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment G.
Other: (list below)

B. Statement of Consistency with the Consolidated Plan
For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolida	ted Plan jurisdiction: (provide name here) Commonwealth of Kentucky
	has taken the following steps to ensure consistency of this PHA Plan with the ted Plan for the jurisdiction: (select all that apply)
	The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below) Other: (list below)
`	No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
	olidated Plan of the jurisdiction supports the PHA Plan with the following actions ommitments: (describe below)
presendecen	Consolidated Plan of Kentucky and the PHA Plan concur in the objectives of rvation of housing units through modernization enabling the production of safe, at and affordable housing for low income renter households through sound gement efforts.
C. Criteria f	or Substantial Deviation and Significant Amendments
1. Amendm 24 CFR Part 90	nent and Deviation Definitions 3.7(r)
PHAs are required Significant Amount when the PHA	red to define and adopt their own standards of substantial deviation from the 5-year Plan and endment to the Annual Plan. The definition of significant amendment is important because it defines will subject a change to the policies or activities described in the Annual Plan to full public hearing w before implementation.

A. Substantial Deviation from the 5-year Plan:

The Housing Authority of Dayton defines "substantial deviation" as a change in the capital budget and/or 5-Year Plan of 50% or more of non-emergency work items or any policy changes which would require resubmission of an updated Plan.

The Housing Authority of Dayton made no substantial deviations from the 5-Year Plan Policy as outlined in the 2000 Agency Plan submitted to HUD.

B. Significant Amendment or Modification to the Annual Plan:

The Housing Authority of Dayton will consider the following actions to be significant amendments or modifications:

- Changes to rent or admissions policies or organization of the waiting list with the exemption of HUD mandated changes in these policies.
- Addition of non-emergency work items in the amount of 50% of the capital budget (items not included in the current Annual Statement or 5-Year Action Plan).

The Housing Authority of Dayton has not made significant amendments or modifications to the annual Plan except those that are adopted to reflect changes in HUD regulatory requirements.

Attachment A Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review					
Applicable & On Display	pplicable Supporting Document &				
	PHA Plan Certifications of Compliance with the PHA Plans and	5 Year and Annual			
X	Related Regulations	Plans			
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans			
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs			
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources			
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Public housing rent determination policies, including the method for setting public housing flat rents	Annual Plan: Rent Determination			
X	check here if included in the public housing A & O Policy	Determination			
X	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			
	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination			

List of Supporting Documents Available for Review				
Applicable	pplicable Supporting Document			
& On Display		Component		
On Display	Public housing management and maintenance policy documents,	Annual Plan:		
X	including policies for the prevention or eradication of pest infestation	Operations and		
	(including cockroach infestation)	Maintenance		
	Results of latest binding Public Housing Assessment System (PHAS)	Annual Plan:		
X	Assessment	Management and		
		Operations		
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey	Annual Plan:		
	(if necessary)	Operations and		
X		Maintenance and		
		Community Service		
	D. I. Cl. (C. C. O.M.	& Self-Sufficiency		
	Results of latest Section 8 Management Assessment System	Annual Plan:		
	(SEMAP)	Management and Operations		
	Any required policies governing any Section 8 special housing types	Annual Plan:		
		Operations and		
	check here if included in Section 8 Administrative Plan	Maintenance		
	Public housing grievance procedures	Annual Plan:		
X	check here if included in the public housing	Grievance Procedures		
	A & O Policy			
	Section's informal review and hearing procedures	Annual Plan:		
	check here if included in Section 8 Administrative Plan	Grievance Procedures		
	The HUD-approved Capital Fund/Comprehensive Grant Program	Annual Plan: Capital		
X	Annual Statement (HUD 52837) for any active grant year	Needs		
	Most recent CIAP Budget/Progress Report (HUD 52825) for any	Annual Plan: Capital		
X	active CIAP grants	Needs		
	Approved HOPE VI applications or, if more recent, approved or	Annual Plan: Capital		
	submitted HOPE VI Revitalization Plans, or any other approved	Needs		
	proposal for development of public housing			
	Self-evaluation, Needs Assessment and Transition Plan required by	Annual Plan: Capital		
X	regulations implementing \$504 of the Rehabilitation Act and the	Needs		
	Americans with Disabilities Act. See, PIH 99-52 (HA).			
	Approved or submitted applications for demolition and/or	Annual Plan:		
	disposition of public housing	Demolition and		
	Approved or submitted applications for Jacienation of sub-	Disposition Annual Plan:		
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Designation of Public		
	nousing (Designated Housing Flans)	Housing		
	Approved or submitted assessments of reasonable revitalization of	Annual Plan:		
	public housing and approved or submitted conversion plans prepared	Conversion of Public		
	pursuant to section 202 of the 1996 HUD Appropriations Act,	Housing		
	Section 22 of the US Housing Act of 1937, or Section 33 of the US			
	Housing Act of 1937			
	Approved or submitted public housing homeownership	Annual Plan:		
	programs/plans	Homeownership		
	Policies governing any Section 8 Homeownership program	Annual Plan:		
	(sectionof the Section 8 Administrative Plan)	Homeownership		

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component		
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency		
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency		
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency		
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident	Annual Plan:		
	services grant) grant program reports	Community Service & Self-Sufficiency		
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention		
	PHDEP-related documentation:	Annual Plan: Safety		
	Baseline law enforcement services for public housing developments assisted under the PHDEP plan;	and Crime Prevention		
	· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement			
	between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);			
	 Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; 			
	 Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and 			
	All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.			
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) check here if included in the public housing A & O Policy	Pet Policy		
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit		
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs		
	Other supporting documents (optional)	(specify as needed)		
X	(list individually; use as many lines as necessary) Community Service & Self-Sufficiency Policy	Community Service		
X	Pet Policy	& Self-Sufficiency Pet Policy		

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA Name: Housing Authority of Dayton		Grant Type and Number Capital Fund Program Grant No: KY36P129501 (01) Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
☐ Original Annual Statement ☐ Performance and Evaluation Report for Period Ending:		Reserve for Disasters/ Emergencies Final Performance and Evaluation Report		Revised Annual S	Revised Annual Statement (revision no:)	
Line No.	Summary by Development Account	Total Estimated Cost To		Total A	al Actual Cost	
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration	1,000				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	15,500				
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	82,075				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	1,110				
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	99,685				
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					
24	Amount of line 21 Related to Security – Soft Costs					
25	Amount of Line 21 Related to Security – Hard Costs					
26	Amount of line 21 Related to Energy Conservation Measures					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

Part II:	Supporting	Pages

PHA Name: Housing Authority of Dayton		Grant Type and N Capital Fund Prog Replacement House	ram Grant No: K			Federal FY of Grant: 2001			
Development Number Name/HA-Wide	General Description of Major Work Categories	Dev. Acct No. Quantity Total Estimated Cost		Total Ac	etual Cost Funds	Status of			
Activities	Categories	Dev. Acet No.	Quantity	Original	Revised	Obligated	Expended	Work	
HA-Wide	Printing & Advertising	1410		1,000					
HA-Wide	A/E Fees	1430		6,000					
HA-Wide	M/C Fees	1430		6,000					
HA-Wide	Agency Plan Revisions	1430		3,500					
HA-Wide	Doors	1460		18,000					
HA-Wide	Appliances	1460		3,500					
HA-Wide	Locks	1460		500					
HA-Wide	Faucets	1460		1500					
HA-Wide	Heating Upgrades	1460		2,500					
HA-Wide	Bath Vanities & Mirrors	1460		3,000					
HA-Wide	Exhaust Fans	1460		625					
HA-Wide	VCT Flooring	1460		6,000					
HA-Wide	Cabinets & Countertops	1460		18,000					
HA-Wide	Painting	1460		12,000					
HA-Wide	Carpet	1460		11,000					
HA-Wide	Closet Shelves	1460		1,500					
HA-Wide	Stair Treads	1460		800					
HA-Wide	Light Fixtures	1460		700					
HA-Wide	Toilets	1460		1,250					
HA-Wide	Tub Surrounds	1460		1,200					
HA-Wide	Non-Dwelling Equipment	1475		1,110					
	Program Total			99,685					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Housing Authori	Capita	Type and Nur al Fund Progra cement Housin	m No: KY36P129	-501 (01	Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	(Quar	Fund Obligate ter Ending Da				Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	12-31-02			6-30-04			

Capital Fund P	rogram F	ive-Year Action Plan			
Part I: Sumr	nary				
PHA Name				⊠Original 5-Year Plan	
	g Authority o			Revision No:	
Development	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
Number/Name/HA-		FFY Grant: 2002	FFY Grant: 2003	FFY Grant: 2004	FFY Grant: 2005
Wide		PHA FY: 2002	PHA FY: 2003	PHA FY: 2004	PHA FY: 2005
	Annual				
HA-Wide	Statement	99,685	99,685	99,685	99,685
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	<u> </u>				
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CFP Funds Listed for					
5-year planning		99,685	99,685	99,685	99,685
Replacement Housing Factor Funds					

-		Five-Year Action Plan es—Work Activities					
Activities for Year 1		Activities for Year: 2002 FFY Grant: PHA FY: 2002		Activities for Year: 2003 FFY Grant: PHA FY: 2003			
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost	
See							
Annual	129-01	Printing & Advertising	1,000	129-01	Printing & Advertising	1,000	
Statement		A/E Fees	6,000		A/E Fees	6,000	
		M/C Fees	6,000		M/C Fees	6,000	
		Agency Plan Revisions	3,500		Agency Plan Revision	3,500	
		Doors	18,000		Doors	18,000	
		Appliances	3,500		Appliances	3,500	
		Locks	500		Locks	500	
		Faucets	1,500		Faucets	1,500	
		Heating Upgrades	2,500		Heating Upgrades	2,500	
		Bath Vanities & Mirrors	3,000		Bath Vanities & Mirrors	3,000	
		Exhaust Fans	625		Exhaust Fans	625	
		VCT Flooring	6,000		VCT Flooring	6,000	
		Cabinets & Countertops	18,000		Cabinets & Countertops	18,000	
		Painting	12,000		Painting	12,000	
		Carpet	11,000		Carpet	11,000	
		Closet Shelves	1,500		Closet Shelves	1,500	
		Stair Treads	800		Stair Treads	800	
		Light Fixtures	700		Light Fixtures	700	
		Toilets	1,250		Toilets	1,250	
		Tub Surrounds	1,200		Tub Surrounds	1,200	
		Non –Dwelling Equipment	1,110		Non –Dwelling Equipment	1,110	
	Total CFP Es	timated Cost	99,685			99,685	

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year: 2004
FFY Grant:
PHA FY: 2004
Activities for Year: 2005
FFY Grant:
PHA FY: 2004
PHA FY: 2005

Development Name/Number	Maior World Cotogories	Estimated Cost	Development Name/Number	Maion Work Catagories	Estimated Cost
Name/Number	Major Work Categories	Estimated Cost	Name/Number	Major Work Categories	Estimated Cost
129-01	Printing & Advertising	1,000	129-01	Printing & Advertising	1,000
	A/E Fees	6,000		A/E Fees	6,000
	M/C Fees	6,000		M/C Fees	6,000
	Agency Plan Revisions	3,500		Agency Plan Revisions	3,500
	Doors	18,000		Air Conditioning	66,185
	Appliances	3,500		Administration Building Renovations	10,000
	Locks	500		Site Improvements	5,000
	Faucets	1,500		Non-Dwelling Equipment	2,000
	Heating Upgrades	2,500			
	Bath Vanities & Mirrors	3,000			
	Exhaust Fans	625			
	VCT Flooring	6,000			
	Cabinets & Countertops	18,000			
	Painting	12,000			
	Carpet	11,000			
	Closet Shelves	1,500			
	Stair Treads	800			
	Light Fixtures	700			
	Toilets	1,250			
	Tub Surrounds	1,200			
	Non –Dwelling Equipment	1,110			
	 Total CFP Estimated Cost	99,685			99,685

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices. **Section 1: General Information/History** A. Amount of PHDEP Grant \$ B. Eligibility type (Indicate with an "x") N1 N2 C. FFY in which funding is requested D. Executive Summary of Annual PHDEP Plan In the space below, provide a brief overview of the PHDEP Plan, including highlights of mair in May include a description of the expected outcomes. The summary must not be more than five (5) sentences long E. Target Areas Complete the following table by indicating each Leactivities will be conducted), the total number of units in each PHDEP Target Area, and the total number of indivi als expected tivities in each Target Area. Unit count information should be consistent with that available in PIC. PHDEP Farget of Units within **Total Population to** the PHDEP Target (Name be Served within Area(s) the PHDEP Target Area(s) F. Duration of Program Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months). 12 Months 18 Months 24 Months

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fundances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For gran or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	t Start Gr Date F	Da	
FY 1995							/
FY 1996				, <u>4</u> L ,	A/A/A		
FY 1997				\bigcap			
FY1998			$D \cap C$				
FY 1999				$ar{ar{\Gamma}} riangleq ar{ar{\Gamma}}$			

Section 2: P

A. PHDEP Pla

In the space below, a objectives, the role of

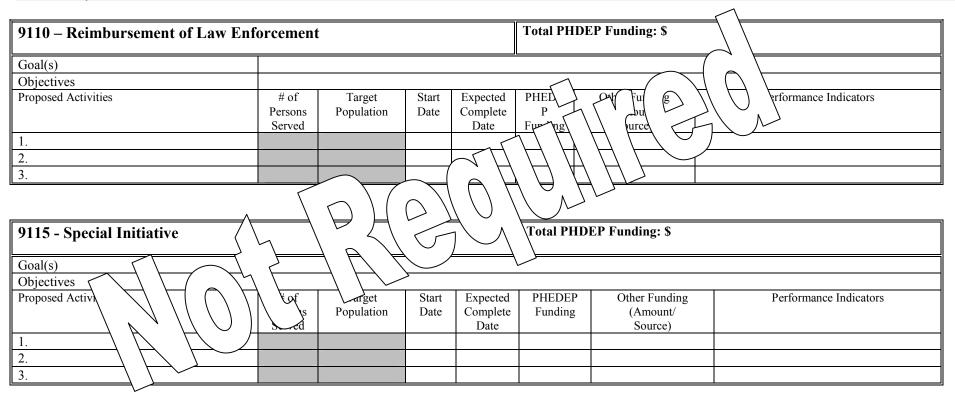
ategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary
Enter the total amount of PHDEP funding allocated to each line item.

EEV PHOED D 1 / C	
FFY PHDEP Budget Sun Original statement	nmary
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	$\land \cap \lor f$
9130 - Employment of Investigators	$I \cap I \cap I$
9140 - Voluntary Tenant Patrol	7 ~ ~
9150 - Physical Improvements	A P H
9160 - Drug Prevent	$\rightarrow \vdash \rightarrow$
9170 - Drug vent	
9180 - Drug \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
9190 - Other P	>
TOTAL PURPLE	
TOTAL PHDEP	

PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.



9116 - Gun Buyback TA Ma	tch			Total PHI	DEP Funding: \$		
Goal(s)					JI		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							
9120 - Security Personnel					Total PHI	DEP Jding: \$	
7120 - Security Tersonner							
Goal(s)					"		
Objectives						1 4 4 4	
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Comple te	huy by k	P our ndir	Performance Indicators
1.			H		$\bigcap^{\vee} \bigwedge^{\vee}$		
3.		\searrow .	` <i>\</i>				
						ال	
9130 – Emplo to v	ga				Total PH	DEP Funding: \$	
Goal(s)	${}_{\scriptstyle \perp} \cup {}_{\scriptstyle \perp}$						
Objectives \							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE Fundin		
1.	Served			Duit			
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								
9150 - Physical Improvements	,				Total PHD	Tu \qu		
9130 - 1 hysical improvements	•							
Goal(s)					∀ , ∀	HHH		
Objectives					$A \cup A$	A' H		
Proposed Activities	# of Persons Served	Target	Start	Ex ted Co		ther Funding (Amount /Source)	Performance Indicators	
1. 2. 3.								
21(2) D	$\forall \vdash$							
9160 - Drug Preventi					Total PHD	DEP Funding: \$		
Goal(s)	7							
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date		\mathcal{E}	Performance Indicators	
1.	Served			Date				
2.								
3.								

9170 – Drug Intervention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	rformance Indicators
1.							
2.							
3.							
							3 Y A' [
9180 – Drug Treatment					Total PHDEP		
Goal(s)					eg T eg T		
Objectives					\Box		
Proposed Activities	# of Person s Served (Target Populatio			HE	Tunating Jount /Source)	Performance Indicators
2. 3.							
9190 – Other Progra					Total PHDEP F	unds: \$	
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment E: Resident Member on the PHA Governing Board

1.	☐ Yes ⊠ No:	Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)								
A.	Name of resident m	nember(s) on the governing board:								
B.	. How was the resident board member selected: (select one)? Elected Appointed									
C.	The term of appoint	tment is (include the date term expires):								
2.	assisted by the I	erning board does not have at least one member who is directly PHA, why not? he PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis he PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity o serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain):								
В.	Date of next term of	expiration of a governing board member: 8-2-02								
C.	Name and title of apofficial for the next	ppointing official(s) for governing board (indicate appointing position):								

Ronald Gunning, Mayor of Dayton

Required Attachment F: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

All Tenants

The Housing Authority of Dayton had no response to a request for volunteers to be a part of a Resident Advisory Board; therefore, a letter has been sent to all residents naming all Housing Authority residents as participants in this Resident Advisory Board.

Required Attachment G: Comments of Resident Advisory Board or Boards & Explanation of PHA Response:

Comments	PHA Response
Bike Racks	PHA will research and add if needed
Cabinets	PHA has budgeted
Carpet	PHA has budgeted
Central Air Conditioning	PHA has budgeted
Refrigerators & Stoves	PHA has budgeted
Closet Doors	PHA has budgeted
Larger LaundryRoom	PHA feels space is adequate and is available 24
	hours per day
Ceiling Fans	PHA llows installation of resident -owned fans
Washers & Dryers	Inadequate space in unit
Dish Washers	Not an allowable PHA expenditure
Flowers	PHA provides flowers free of charge – tenant
	must plant and care for them
Area for Ball Playing	No space – two parks within walking distance
Shower Walls	PHA has budgeted
Screen Doors	PHA has budgeted to replace as needed
Painting	PHA has budgeted
Bathroom Vanities	PHA has budgeted
Outdoor Benches	PHA budgeted from operating monies
Trash Containers	PHA recently added around site

Required Attachment H: Component 3, (6) Deconcentration and Income Mixing

a. Yes No:	Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
b. Yes No:	Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments							
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)((iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]				

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary								
PHA Name: Housing Authority of Dayton		Grant Type and Number Capital Fund Program Grant No Replacement Housing Factor Gr	o: KY36P129-501 (00)	,	Federal FY of Grant: 2000			
Original Annual Statement		Reserve for Disast		Revised Annual St	atement (revision no: 02			
⊠Per	formance and Evaluation Report for Period Ending: 6	-30-01 Final Performance	e and Evaluation Report		•			
Line								
No.	Summary by Development Account	Total Estim		Total Actual Cost				
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations							
3	1408 Management Improvements	6,000	6,000					
4	1410 Administration	1,000	1,000					
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs	22,000	22,400					
8	1440 Site Acquisition							
9	1450 Site Improvement	2,262	2,262					
10	1460 Dwelling Structures	66,759	65,765					
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Nondwelling Structures							
13	1475 Nondwelling Equipment		594					
14	1485 Demolition							
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines $2-20$)	98,021	98,021					
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504 compliance							
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security – Hard Costs							
26	Amount of line 21 Related to Energy Conservation Measures							
Signatu	re of Executive Director			Date				
Dow	onna Craig							
KOX	Roxanne Craig							

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Housing Authority of Dayton		Grant Type and Number Capital Fund Program Grant No: KY36P129-501 (00) Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number General Description of Major Work				Total Estimated Cost		Total Actual Cost		
Name/HA-Wide Activities	Categories	Dev. Acct No.	Quantity	Original	Revised	Funds Obligated	Funds Expended	Status of Work
HA-Wide	Administrative Salary	1408		6,000	6,000			
HA-Wide	Printing & Advertising	1410		1,000	1,000			
HA-Wide	A/E Fees	1430		6,000	6,000			
HA-Wide	M/C Fees	1430		6,000	6,000			
HA-Wide	Agency Plan Revisions	1430		2,000	2,400			
HA-Wide	Parking Lot Reapirs	1430		8,000	8,000			
HA-Wide	Drainage Culvert Repairs	1450		2,262	2,262			
HA-Wide	Doors	1460			11,400			
HA-Wide	Appliances	1460			2,000			
HA-Wide	Locks	1460			500			
HA-Wide	Faucets	1460			1,500			
HA-Wide	Heating Upgrades	1460			1,250			
HA-Wide	Bath Vanities & Mirrors	1460			2,100			
HA-Wide	Exhaust Fans	1460			625			
HA-Wide	VCT Flooring	1460		12,000	6,000			
HA-Wide	Cabinets & Countertops	1460			14,000			
HA-Wide	Painting	1460		26,259	10,738			
HA-Wide	Carpet	1460		28,500	11,000			
HA-Wide	Closet Shelves	1460			1,152			
HA-Wide	Stair Treads	1460			800			
HA-Wide	Light Fixtures	1460			700			
HA-Wide	Toilets	1460			1,250			
HA-Wide	Tub Surrounds	1460			750			
HA-Wide	Non-Dwelling Equipment	1475			594			
	Program Total			98,021	98,021			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Housing Authority of Dayton			Grant Type and Number Capital Fund Program No: KY36P129-501 (00) Replacement Housing Factor No:				Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	(Qua	Fund Obligate rter Ending Da		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	3-31-02			9-30-03			